

Collection Information Statement for Individuals

(If you need additional space, please attach a separate sheet)

1. Borrower's name and address (including country)		2. Home phone number		3. Marital status	
		4. Social Security Numbers	a. Borrower	b. Spouse	
Employment Information					
5. Borrower's employer or business (name & address)		6. Business phone number		7. Occupation	
		8. Paydays		9. (Check appropriate box) <input type="checkbox"/> Wage earner <input type="checkbox"/> Partner <input type="checkbox"/> Sole proprietor	
10. Spouse's employer or business (name & address)		11. Business phone number		12. Occupation	
		13. Paydays		14. (Check appropriate box) <input type="checkbox"/> Wage earner <input type="checkbox"/> Partner <input type="checkbox"/> Sole proprietor	
Personal Information					
15. Name, address and telephone number of next of kin or other reference					
16. Age and relationship of dependents (exclude husband and wife) living in your household				17. Number of exemptions claimed on Form W-4	
18. Date of birth		a. Borrower		b. Spouse	
General Financial Information					
19. Latest filed income tax return (tax year)		20. Adjusted gross income on return			
21. Bank accounts (include Savings & Loans, Credit Unions, IRA and KEOGH accounts, Certificates of Deposits, etc.)					
Name of Institution	Address	Type of Account	Account No.	Balance	
Total (Enter in item 28)					
22. Bank charge cards, Lines of credit, etc.					
Type of Account or Card	Name and Address of Financial Institution	Monthly Payment	Credit Limit	Amount Owed	Credit Available
Totals (Enter in item 34)					
23. Safe deposit boxes rented or accessed (list all locations, box number, and contents)					
24. Real Property (Brief description and type of ownership)			Address (Include County and State)		
25. Life Insurance (Name of company)		Policy Number	Type	Face Amount	Available Loan Value
a.					
b.					

Asset and Liability Analysis								
	Description	Cur. Mkt. Value	Liabilities Bal. Due	Equity in Asset	Amt. Of Mo. Pmt.	Name & addr of Lien /note holder/Obligee	Date Pledged	Date of Final Pmt.
27.	Cash							
28.	Bank accounts							
29.	Stocks, bonds, Investments							
30.	Cash or Loan Value of Insur.							
31.	Vehicles (model, yr, license)							
	A							
	B							
	C							
32.	Real Property							
	A							
	B							
	C							
33.	Other Assets							
	A							
	B							
	C							
	D							
34.	Bank revolving credit							
35.	Other Liabilities (Include: child support, judgments, notes, and other charge accounts)							
	A							
	B							
	C							
	D							
36.	Other student loans owed							
37.	Federal taxes owed							
38.	Totals			\$	\$			
Monthly Income and Expense Analysis								
Income				Necessary Living Expenses				
Source		Gross	Net	47. Rent		\$		
39. Wages/Salaries (Taxpayer)		\$	\$	48. Groceries				
40. Wages/Salaries (Spouse)				49. Allowable installment payments				
41. Interest-Dividends				50. Utilities				
42. Net business income				51. Transportation				
43. Rental Income				52. Insurance				
44. Pension (Taxpayer)				53. Medical				
45. Pension (Spouse)				54. Estimated tax payments				
				55. Other expenses (specify)				
46. Total		\$	\$	56. Total		\$		
				57. Net difference (income less necessary expenses)		\$		
Certification								
Under penalties of perjury, I declare that to the best of my knowledge and belief this statement of assets, liabilities, and other information is true, correct, and complete.								
58. Your Signature			59. Spouse's signature (if joint return was filed)				60. Date	